CPJNT-01, NEW 4/02

STATE OF CONNECTICUT **DEPARTMENT OF CONSUMER PROTECTION**

OCCUPATIONAL & PROFESSIONAL LICENSING DIVISION

Telephone: (860) 713-6145 WebSite: **www.state.ct.us/dcp/**



For Official Use Only			

APPLICATION FOR JOINT CORPORATE PRACTICE

INSTRUCTIONS:

All spaces must be completed - please print in ink or type. This application must be accompanied with a check <u>or money order in the amount of \$450.00</u>, made payable to "Treasurer, State of CT". Application fees are non-refundable. Attach a **Certificate of Good Standing or Authority** issued by the Connecticut Secretary of State and return this completed application and fee in the enclosed return envelope or to:

→ Department of Consumer Protection, License Services Division, 165 Capitol Avenue, Hartford, CT 06106 Please check the license type you are applying for: ☐ Corporate Practice of Architecture & Land Surveying ☐ Corporate Practice of Architecture & Professional Engineering oxdot Corporate Practice of Architecture, Professional Engineering & Land Surveying ☐ Corporate Practice of Professional Engineering & Land Surveying **Name of Corporation Street Address** City **Zip Code** State Telephone Number (w/ area code) **Email Address** FEIN Number Mailing Address (if different from above) Street Address City State Zip Code If a "Foreign" Corporation, do you have a Certificate of Authority from the Secretary of State of the State **State of Incorporation** of Connecticut? Yes No If yes, please attach a statement providing the dates(s) of conviction(s), the court(s) where the cases were decided and a description of the circumstances relating to each conviction(s). **Indicate Organizational Structure:** ☐ Corporation ☐ Professional Corporation (PC) ☐ Limited Liability Company (LLC) FOR CORPORATION, PROFESSIONAL CORPORATION OR LIMITED LIABILTY COMPANY List below the names, residence addresses and titles of all directors and officers Name Address Tile CT License Number CT License Number Name Address Title Name Address Title CT License Number Name Address Title CT License Number HOLDERS OF VOTING STOCK CT License Number Name Address Voting Shares CT License Number **Voting Shares** Name Address CT License Number Name Address Voting Shares Voting Shares CT License Number Name Address

LIST ALL PERSONNEL IN RESPONSIBLE CHARGE WHO ACT ON BEHALF OF THE CORPORATION AS A PROFESSIONAL ENGINEER, ARCHITECT OR LAND SURVEYOR WHO HOLD CONNECTICUT LICENSES

Name	Address	CT License Number
Name	Address	CT License Number
Name	Address	CT License Number
Name	Address	CT License Number

AFFIDAVIT (To be made before a Notary Public or other official qualified by law to administer oaths) I, the applicant or duly authorized member of the partnership or association, or officer of the corporation on behalf of which the above application is made, being duly sworn according to law depose and say the answers above set forth are true to the best of my knowledge and belief and that this application is made for the purpose of inducing the issuance of the registration requested.				
Signature of Officer, Partner or Proprietor	Title	Date		
Subscribed and sworn to before me:				
Signature of Notary Public	Date	My Commission Expires		

INSTRUCTIONS FOR CERTIFICATE OF JOINT CORPORATE PRACTICE

- 1) The application must be completed, notarized and submitted with the **application fee of \$450.00**, made payable to **"Treasurer, State of CT"**. Application fees are non-refundable.
- 2) Persons licensed as architects, professional engineers, or land surveyors must own not less than two-thirds of the voting stock of the corporation.
- 3) Persons licensed as architects must own not less than one-third of the voting stock in any corporation formed for the joint practice of architecture and professional engineering services or for the joint practice of architecture and land surveying.
- 4) List only professional engineer(s), architect(s) and land surveyor(s) who are currently licensed in the State of CT.
- 5) Attach a **Certificate of Good Standing** or **Authority** (the form may also be known as **"Certificate of Legal Existence"**) which you must obtain from the:

Office of the Secretary of State Certification Unit 30 Trinity Street PO Box 846 Hartford, CT 06106 Telephone: (860) 509-6002

WebSite: www.sots.state.ct.us

6) Mail the original application form in the enclosed return envelope or to the **Department of Consumer Protection**, **License Services Division**, **165 Capitol Ave.**, **Hartford**, **CT 06106**. Please keep a copy of the application for your records.

Connecticut Licensee's Ownership Interest

Practice Form	Section	General Business	PC	LLC	LLP
Architecture	20-298b	2/3 voting shares	100%	100%	100%*
Engineering	20-306a	-0-	100%	100%	100%*
Land Surveying	20-306a	-0-	100%	100%	100%*

Joint Practices

Practice Form	Section	General Business	PC	LLC	LLP
Architecture/Engineering	20-360b	2/3 of company voting shares/at least 20% of each profession	100%	Same as general business corp	100%*
Architecture/Land Surveying	20-306b	2/3 of company voting shares/at least 20% of each profession	100%	Same as general business corp	100%*
Engineering/Land Surveying	20-360b	2/3 of company voting shares/at least 20% of each profession	100%	Same as general business corp	100%*
Architecture/Engineering/L and Surveying	20-306b	2/3 of company voting shares at least 20% of each profession	100%	Same as general business corp	100%*

^{*} No Regulations Applicable